



Incident Report

Print Date/Time: 11/01/2016 15:08
Login ID: ss0100

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2016-00020681

Incident Date/Time: 10/17/2016 2:45:00 PM
Location: SR 92 / LAKE DR
LAKE STEVENS WA 98258
Phone Number: (206) 499-6041
Report Required: Yes
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens
Source: 911
Priority: 3F
Status: 3
Nature of Call:

Unit/Personnel

Unit	Personnel
19D3	SS0135-Parnell
19R1	SS0144-Michael

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	YANG, HAILEY		(206) 499-6041			
1	Driver	HARDY-MILTON, KATHLEEN MARIE	11302 36TH ST NE Lake Stevens WA 982588171	(425) 231-3785		Female	11/29/1972
2	Driver	COWEN, MICHAEL RAY	9330 ARLINGTON HEIGHTS RD Arlington WA 982234408	(360) 631-7266		Male	11/11/1962
3	Driver	MILTON, ELISABETH	11302 36TH ST NE Lake Stevens WA 982588171			Female	06/29/2004
1	Passenger	HARDIN, KYLLIE	11302 36TH ST NE Lake Stevens WA 982588171			Female	11/11/1998
2	Passenger	PARSONS, JANESEA	13120 19TH PL NE LAKE STEVENS WA 98258	(425) 737-1580		Female	07/05/2000
3	Passenger	KONG, MAI LEE	2615 S 146TH ST Seatac WA 981684231			Female	08/29/1990
4	Driver	YANG, BEE	872 S 92ND ST Tacoma WA 984444366	(503) 913-5302		Male	12/12/1985

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	2005	Honda	ELEMENT		AJA0459	WA
Involved Vehicle	Passenger Car	2005	Chrysler	TOWSW		AIC2104	WA
Involved Vehicle	Passenger Car	2004	Pontiac	AZTEK		AZS4277	WA

Disposition(s)

Disposition	Count
G	2
R	1



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Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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CAD Narrative

10/17/2016 : 15:22:02 SP0166 Narrative: WITH DRIVER BACK TO SCENE

10/17/2016 : 15:19:33 SP0166 Narrative: 19D3 FOLLOWING DRIVER TO HOUSE,WILL ADV ON LOC

10/17/2016 : 15:18:35 SP0168 Narrative: COMMAND TERMINATED

10/17/2016 : 15:18:07 SP0166 Narrative: AID TX 2

10/17/2016 : 15:06:53 SP0168 Narrative: 5 grn, 2 yel

10/17/2016 : 15:04:55 SP0166 Narrative: aid os

10/17/2016 : 14:56:09 SP0428 Narrative: REQ AID FOR CABN SUBJS MINOR INJS

10/17/2016 : 14:51:00 SP0428 Narrative: NOT BLKING

10/17/2016 : 14:47:33 SP0181 Narrative: ALL VEHS PULLED ONTO LAKE DR NOW

10/17/2016 : 14:47:22 SP0407 Narrative: ANOTHER RP REPORTING THE SAME AUSTIN, 425 412 0042

10/17/2016 : 14:47:20 SP0181 Narrative: LR/181

10/17/2016 : 14:46:38 SP0181 Narrative: ON SR 92, NON INJ, BLKING , HONDA ELEMENT VS ND VAN AND ANOTHER VEH

COLLISION REPORT



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E597384**

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INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION

CASE # **2016-00020681**

LOCAL AGENCY CODING

TOTAL # OF UNITS **03** OBJECT STRUCK

DATE OF COLLISION **10 - 17 - 2016** TIME (2400) **1445** COUNTY # **31** MILES **0** CITY # **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION
SR 92 BLOCK NO. **9500**
 MILE POST

DISTANCE **0** MILES **0** FEET OF (REFERENCE OR CROSS STREET) **LAKE DR**

UNIT 01 MOTOR VEHICLE PEDAL-CYCLE DAMAGE THRESHOLD MET YES NO PHONE **D: 4252313785**

LAST NAME **HARDY-MILTON** FIRST NAME **KATHLEEN** MIDDLE INITIAL **M**

STREET NEW ADDRESS **11302 36TH ST NE**

CITY **LAKE STEVENS** ST **WA** ZIP **982588171**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **HARDYKM289Q9** STATE **WA** SEX **F** D.O.B. **11 - 29 - 1972**

ON DUTY STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **AZS4277** STATE **WA** VIN# **3G7DA03E54S523517**

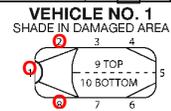
TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2004** MAKE **PONT** MODEL **AZTEK** STYLE **UT** VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. **ROBERT MILTON 11302 36TH ST NE LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **GEICO 4255182885**

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



UNIT 02 MOTOR VEHICLE PEDAL-CYCLE PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET YES NO PHONE **D: 3606317266**

LAST NAME **COWEN** FIRST NAME **MICHAEL** MIDDLE INITIAL **R**

STREET NEW ADDRESS **9330 ARLINGTON HEIGHTS RD**

CITY **ARLINGTON** ST **WA** ZIP **982234408**

CDL RESTRICTIONS ENDORSEMENTS **L**

DRIVER'S LICENSE # **COWENMR386QJ** STATE **WA** SEX **M** D.O.B. **11 - 11 - 1962**

ON DUTY STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **AIC2104** STATE **WA** VIN# **2C4GP44R15R553019**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2005** MAKE **CHRY** MODEL **TOWSW** STYLE **SV** VEHICLE TOWED YES NO TOWED BY GOVT. VEHICLE YES NO

REGISTERED OWNER INFO. **MICHAEL COWEN 11424 36TH DR NE UNIT 34 MARYSVILLE WA 98271**

LIABILITY INSURANCE IN EFFECT INSURANCE CO & POLICY # **AMERIPRISE BX00636306**

VEHICLE LEGALLY STANDING YES NO CITATION # CHARGE



OFFICER'S NAME (PRINT) **K. PARNELL** BADGE OR ID # **0135** AGENCY **WA0311900**

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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E597384**

CASE # **2016-00020681**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **MILTON ELISABETH**

ADDRESS & PHONE # **11302 36TH ST NE LAKE STEVENS WA 982588171** SEX **F** D.O.B. MMDDYYYY **06** - **29** - **2004**

PASSENGER WITNESS UNIT # **1** SEAT POS. **3** AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **7** NATURE OF INJURIES **LEG PAIN**

NAME (LAST, FIRST, MIDDLE INITIAL) **HARDIN KYLLIE**

ADDRESS & PHONE # **11302 36TH ST NE LAKE STEVENS WA 982588171** SEX **F** D.O.B. MMDDYYYY **11** - **11** - **1998**

PASSENGER WITNESS UNIT # **1** SEAT POS. **4** AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **7** NATURE OF INJURIES **HEAD, NECK, BACK PAIN**

NAME (LAST, FIRST, MIDDLE INITIAL) **PARSONS JANESEA**

ADDRESS & PHONE # **13120 19TH PL NE LAKE STEVENS WA 98258 4257371580** SEX **F** D.O.B. MMDDYYYY **07** - **05** - **2000**

PASSENGER WITNESS UNIT # **1** SEAT POS. **6** AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **7** NATURE OF INJURIES **HEAD, NECK, BACK PAIN**

NARRATIVE

Veh. 2 was stopped directly behind veh. 3 for traffic in WB lane of SR 92. Veh. 1 was traveling WB on 92, did not stop in time. The front end of veh. 1 impacted the rear end of veh. 2, pushing veh. 2 forward. The front end of veh. 2 impacted the rear of veh. 3. Two juvenile passengers in veh. 1 were transported by aid for head, neck, and back pain.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

K. PARNELL INVESTIGATING OFFICER'S SIGNATURE **10-17-16 03:57 PM** DATE UNIT OR DIST. DET _____ PLACE SIGNED _____

APPROVED BY **C. WELLS 0131** DATE **10/18/2016 8:32:10 PM**

BADGE OR ID # **0135** ORI # **WA0311900** TIME POLICE DISPATCHED **2:47 PM** TIME POLICE ARRIVED **2:50 PM**



STATE OF WASHINGTON
POLICE TRAFFIC
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1591972

CORRECTION

REPORT NO. **E597384**

CASE # **2016-00020681**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **KONG MAIL**

ADDRESS & PHONE # **2615 S 146TH ST SEATAC WA 981684231** SEX **F** D.O.B. **08** - **29** - **1990**

PASSENGER WITNESS UNIT # **3** SEAT POS. **3** AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE # SEX D.O.B. - -

PASSENGER WITNESS UNIT # SEAT POS. AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE # SEX D.O.B. - -

PASSENGER WITNESS UNIT # SEAT POS. AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NARRATIVE

Veh. 2 was stopped directly behind veh. 3 for traffic in WB lane of SR 92. Veh. 1 was traveling WB on 92, did not stop in time. The front end of veh. 1 impacted the rear end of veh. 2, pushing veh. 2 forward. The front end of veh. 2 impacted the rear of veh. 3. Two juvenile passengers in veh. 1 were transported by aid for head, neck, and back pain.

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K. PARNELL INVESTIGATING OFFICER'S SIGNATURE **10-17-16 03:57 PM** DATE UNIT OR DIST. DET PLACE SIGNED

APPROVED BY **C. WELLS 0131** DATE **10/18/2016 8:32:10 PM**

BADGE OR ID # **0135** ORI # **WA0311900** TIME POLICE DISPATCHED **2:47 PM** TIME POLICE ARRIVED **2:50 PM**



SUPPLEMENTAL POLICE TRAFFIC COLLISION REPORT



013197

REPORT NO. E597384

CASE # 2016-00020681

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COMMERCIAL MOTOR CARRIER

UNIT # USDOT IOC # VEHICLE TYPE CARGO BODY TYPE

CARRIER NAME

CARRIER ADDRESS

CITY ST ZIP

NAME SOURCE # AXLES GVWR PLACARD + NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT # 3 MOTOR VEHICLE [checked] PEDAL-CYCLE [] PEDESTRIAN [] PROPERTY OWNER [] DAMAGE THRESHOLD MET YES [checked] NO [] PHONE D: 5039135302

LAST NAME YANG FIRST NAME BEE MIDDLE INITIAL

STREET NEW ADDRESS 872 S 92ND ST

CITY TACOMA ST WA ZIP 984444366

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # YANG*B*158RK STATE WA SEX M D.O.B. MMDDYYYY 12 - 12 - 1985

ON DUTY [] STATUS AIRBAG 2 RESTR. 9 EJECT 1 HELMET USE 2 INJURY CLASS 1 NATURE OF INJURIES

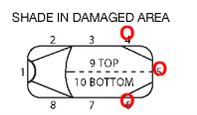
LICENSE PLATE # AJA0459 STATE WA VIN# 5J6YH28315L012745

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2005 MAKE HOND MODEL ELEMENT STYLE UT VEHICLE TOWED YES [] NO [checked] TOWED BY GOVT. VEHICLE YES [] NO [checked]

REGISTERED OWNER INFO. MAI KONG 2615 S 146TH ST SEATAC WA 98168

LIABILITY INSURANCE IN EFFECT [checked] INSURANCE CO & POLICY # PROGRESSIVE 911970300 VEHICLE LEGALITY STANDING YES [checked] NO [] CITATION # CHARGE



UNIT # MOTOR VEHICLE [] PEDAL-CYCLE [] PEDESTRIAN [] PROPERTY OWNER [] DAMAGE THRESHOLD MET YES [] NO [] PHONE

LAST NAME FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX D.O.B. MMDDYYYY

ON DUTY [] STATUS AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

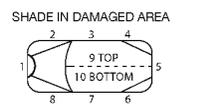
LICENSE PLATE # STATE VIN#

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED YES [] NO [] TOWED BY GOVT. VEHICLE YES [] NO []

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT [] INSURANCE CO & POLICY # CITATION # CHARGE



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

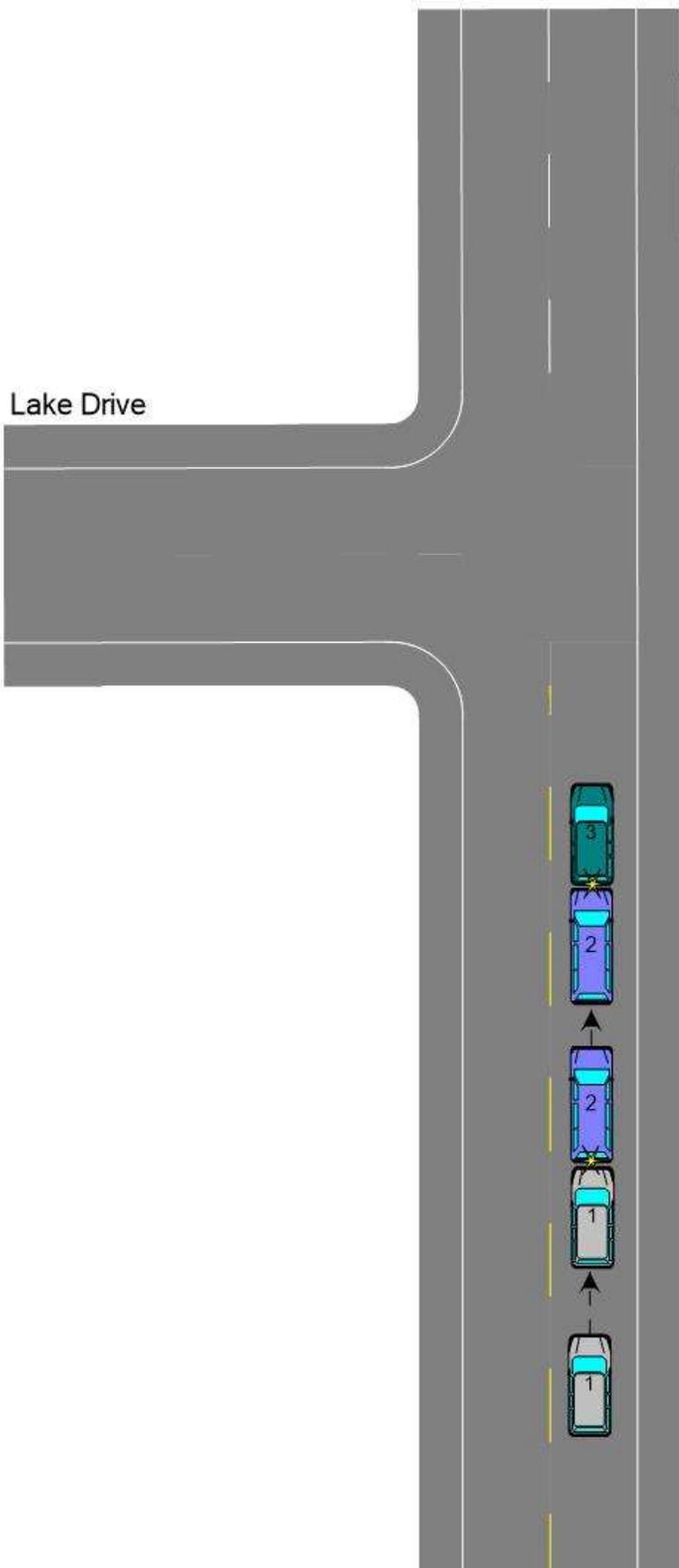
K. PARNELL INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST DET 10-17-16 03:57 PM DATED: PLACE SIGNED

BADGE OR ID # 0135 ORI # WA0311900 APPROVED BY WELLS DATE 10/18/201 PAGE 4 OF 5

REPORT NO. E597384

CASE # 2016-00020681

DATE AND TIME OF COLLISION 10/17/16 14:45



SR 92

Not drawn to scale